

# Best Available Copy

CLAIMS ONLY						SERIAL NO.		FILING DATE			
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.					
1	1					51					
2		/				52					
3		/				53					
4		/				54					
5		/				55					
6	/					56					
7		/				57					
8		/				58					
9		/				59					
10		/				60					
11		/				61					
12		/				62					
13	/					63					
14						64					
15						65					
16						66					
17						67					
18						68					
19						69					
20						70					
21						71					
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23						73					
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25						75					
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32						82					
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35						85					
36						86					
37						87					
38						88					
39						89					
40						90					
41						91					
42						92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.	2					TOTAL IND.					
TOTAL DEP.	11					TOTAL DEP.					
TOTAL CLAIMS	13					TOTAL CLAIMS					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS